

**Research Data Advisory Council  
Proposed Research and Budget Proposals for the  
Iowa Legislative Commission on Affordable Health Care Plans  
for Small Businesses and Families  
July 18, 2007**

**UI College of Public Health--Advisory Council Coordination**

The UI College of Public Health will provide staff support for the Research Data Advisory Council including meeting coordination, meeting material development, and process purchasing and travel expenses as an in kind contribution to the project. Payment for any extraordinary expenses shall be approved, in advance, by the Commission, the Legislative Services Agency, and the Legislative Council.

**Proposed budget..... up to \$14,000**

**Charity Care Delivered by Iowa Hospitals**

One means of addressing the underlying cost of healthcare is to determine the cost of charity care. This proposal suggests three strategies for estimating the amount of care provided by hospitals, emergency rooms, and hospital-based ambulatory surgery centers. 1) Hospital claims data for all Iowa hospitals for 1/1/01 – 12/31/06 will be linked to the AHA Annual Survey data and Medicare hospital cost reports. Analyses will determine the total number of admissions to Iowa hospitals who lack health insurance; the diagnoses and costs associated with these admissions; the distributions of uninsured patients by hospital and zip code; and the socio-demographic and clinical characteristics of uninsured patients. 2) Emergency Room claims data for all Iowa hospitals for patients who were not admitted for 1/1/04 – 12/31/06 will be linked to the AHA Annual Survey data files. Analyses will determine the total number of ER visits by patients who lack health insurance; the diagnoses and costs associated with these visits; the distributions of uninsured patients by hospital and zip code; and the socio-demographic and clinical characteristics of uninsured patients. 3) Analysis of IHA data for all hospital-based ambulatory surgery centers for 1/1/04 – 12/31/06. Analyses will determine total numbers and types of ambulatory surgical procedures performed in patients without health insurance; distributions of uninsured patients; and the demographic and clinical characteristics of ambulatory surgical patients without insurance.

**Proposed budget.....up to \$21,160**

**State Public Policy Group –Stakeholder Interviews**

A proposed means of determining themes, priorities, perspectives, principles, and approaches regarding healthcare reform is to conduct interviews with individuals from several stakeholder groups to gather qualitative data from which such themes, priorities, perspectives, principles, and approaches might be drawn for further consideration by the Commission. SPPG expects the interviews will be conducted with leadership of individual members of stakeholder groups identified by the Commission. Topics of those conversations will be flexible according to the individual and role in the health care scene, and will include suggested policy solutions to specific issues, potential for stakeholder support, and any current efforts supported by the stakeholder. A summary report of the 35 interviews with analysis will be provided.

**Proposed budget.....up to \$35,000**

**Literature Review and Simulations**

In order to provide useful background research and analytic support for the work of the Commission in exploring productive health care reform initiatives, a comprehensive literature review would be conducted on health insurance coverage and access in Iowa. In addition, an in-depth analysis would be conducted of specific state initiatives to determine the best approach for Iowa. Once the best approaches for Iowa are determined, Simulation models could be conducted. The simulation models proposed for this project have two different purposes: 1) they will be used to fill the data gaps in the absence of a comprehensive survey of Iowa's residents and their health insurance status and 2) simulation models can provide a reasonably accurate picture of how certain kinds of reforms will affect the number of uninsured, private-sector "crowd out," state budgets, and gross state product. Deliverables include a 10 – 15 page report consisting of data tables and accompanying descriptive text with summary data on the Iowa economy, health care delivery system, insurance markets, uninsured and access to care. In addition the simulation models will result in reports for a baseline reform package, determined by the Commission, plus a limited scope of three other different reform package simulations. Each simulation report will be approximately 10 – 15 pages in length and include tables of baseline estimates, assumptions and outcomes.

**Proposed Budget.....Pending contingent upon the needs/requests of the Commission**